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# BEFORE THE BOARD OF MEDICAL EXAMINERS

### IN THE STATE OF ARIZONA

In the Matter of

KIMBALL BARNES, M.D.

Holder of License No. **11246**For the Practice of Medicine
In the State of Arizona.

Board Case No. MD-00-0108 MD-01-0026

FINDINGS OF FACT, CONCLUSIONS OF LAW AND ORDER

(Letter of Reprimand)

This matter was considered by the Arizona Board of Medical Examiners ("Board") at its public meeting on February 6, 2002. Kimball Barnes, M.D., ("Respondent") appeared before the Board with legal counsel Michael Ryan, for a formal interview pursuant to the authority vested in the Board by A.R.S. § 32-1451(I). After due consideration of the facts and law applicable to this matter, the Board voted to issue the following findings of fact, conclusions of law and order.

## **FINDINGS OF FACT**

- The Board is the duly constituted authority for the regulation and control of the practice of allopathic medicine in the State of Arizona.
- 2. Respondent is the holder of License No. 11246 for the practice of medicine in the State of Arizona.

#### MD-00-0108

- 3. The Board initiated case number MD-00-0108 after receiving a complaint from a patient ("Patient") that had been referred to Respondent for a surgical consult that Respondent diagnosed Patient with an inguinal hernia without performing a physical examination.
- 4. Respondent performed surgery on Patient to repair the hernia on October 14, 1999. Patient also complained that after the first surgery she complained to

Respondent of continued pain and Respondent diagnosed a femoral hernia and recommended additional surgery. Respondent did not perform a second surgery.

- 5. In his initial office evaluation Respondent did not record a physical examination indicating any landmarks to define where the hernia was and there was no adequate history or physical as expected for a surgical consultation.
- 6. At the formal interview before the Board, Respondent testified that Patient was referred by her physician and that Patient told him she had a right inguinal hernia. Respondent testified that he had Patient stand for an examination and he asked to perform a Valsalva maneuver, but Patient was reluctant to disrobe. Respondent noted that Patient eventually complied with his request.
- 7. Respondent further testified that Patient did not have any bulge below the inguinal ligament and at no point did Patient tell him she had discomfort below the inguinal ligament.
- 8. Respondent testified that the surgery proceeded normally and that Patient had no problems after the surgery. Respondent testified that he did not hear from Patient until she returned for her follow-up visit.
- 9. The only documentation of the initial office-visit with Patient was a drawing containing notes regarding the kind of surgery to be performed.
- 10. The physical examination to clear Patient for surgery was conducted by another physician.

#### MD-01-0026

11. The Board initiated case number MD-01-0026 after receiving a complaint from a patient ("Patient") that Respondent performed a laparoscopic cholecystectomy that resulted in an infection of a permanent pacemaker and pericardial leads.

- 12. On January 1, 1999, Patient presented to the emergency room at Scottsdale Healthcare Shea complaining of upper right quadrant pain. Patient was subsequently diagnosed with acute cholecystitis and secondary pancreatitis.
- 13. Respondent was asked to assess Patient. Patient had a history of cardiac surgery, including the placement of a permanent pacemaker in a subcutaneous pocket in the epigastrium. Respondent confirmed the earlier diagnosis of acute cholecystitis and secondary pancreatitis. Respondent started intraveneous antibiotics and scheduled Patient for surgery the following day.
- 14. Respondent performed a laparoscopic cholecystectomy the next day. Patient underwent an uneventful recovery and was discharged a day later. Pathology of the removed gallbladder indicated it was gangrenous and the cultures indicated an Enterobacterial organism.
- 15. One week later, Patient followed up with Respondent who noted that there was no evidence of infection and discharged Patient from further surgical follow-up.
- 16. Approximately one month later Patient saw his cardiologist for pain and tenderness involving his pacemaker. Patient was subsequently seen by a cardiothoracic surgeon who determined that Patient's pacemaker was infected. Patient was readmitted to the hospital and the pacemaker removed. The surgeon who removed the pacemaker noted that one of the ports for the previous laparoscopic cholecystectomy was extremely close to the permanent pacemaker pocket.
- 17. Respondent testified at the formal hearing that Patient's family asked that Respondent not remove Patient's pacemaker. Respondent did not document this request in Patient's chart.
- 18. Respondent's physical examination of Patient described an abdomen with no masses and did not describe anything that would lead someone reading the record to

- The Board of Medical Examiners of the State of Arizona possesses
- The Board has received substantial evidence supporting the Findings of 2. Fact described above and said findings constitute unprofessional conduct or other grounds for the Board to take disciplinary action.
- The conduct and circumstances above in paragraphs 5, 9 and 17 through 3. 20 constitute unprofessional conduct pursuant to A.R.S. § 32-1401 (25)(q) "[a]ny conduct or practice which is or might be harmful or dangerous to the health of the patient or the public."

### **ORDER**

Based upon the foregoing Findings of Fact and Conclusions of Law,

IT IS HEREBY ORDERED that:

Respondent is issued a Letter of Reprimand for inadequate preoperative evaluation and failure to meet the standard of care for documentation.

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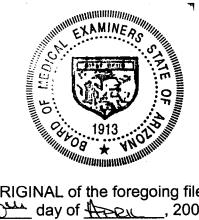
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## RIGHT TO PETITION FOR REVIEW

Respondent is hereby notified that he has the right to petition for a rehearing. Pursuant to A.R.S. § 41-1092.09, as amended, the petition for rehearing must be filed with the Board's Executive Director within thirty (30) days after service of this Order and pursuant to A.A.C. R4-16-102, it must set forth legally sufficient reasons for granting a rehearing. Service of this order is effective five (5) days after date of mailing. If a motion for rehearing is not filed, the Board's Order becomes effective thirty-five (35) days after it is mailed to Respondent.

Respondent is further notified that the filing of a motion for rehearing is required to preserve any rights of appeal to the Superior Court.

DATED this 10th day of april, 2002.



**BOARD OF MEDICAL EXAMINERS** OF THE STATE OF ARIZONA

**Executive Director** 

ORIGINAL of the foregoing filed this day of there , 2002 with:

The Arizona Board of Medical Examiners 9545 East Doubletree Ranch Road Scottsdale, Arizona 85258

Executed copy of the foregoing mailed by U.S. Certified Mail this We day of April, 2002, to:

Michael J. Ryan Broening Oberg Woods Wilson & Cass, P.C. 1122 East Jefferson Street PO Box 20527

| 1  | Phoenix, Arizona 85036-0527  |
|----|--|
| 2  | Executed copy of the foregoing mailed by U.S. Mail this                |
| 3  | day of April 1915, 2002, to:   |
| 4  | Kimball Barnes, M.D.   |
| 5  | 10250 North 92nd Street<br>Suite 208                                   |
| 6  | Scottsdale, Arizona 85258-4519   |
| 7  | Copy of the foregoing hand-delivered this day of, 2002, to:            |
| 8  |  |
| 9  | Christine Cassetta Assistant Attorney General                          |
| 10 | Sandra Waitt, Management Analyst<br>Lynda Mottram, Compliance Officer  |
| 11 | Investigations (Investigation File) Arizona Board of Medical Examiners |
| 12 | 9545 East Doubletree Ranch Road<br>Scottsdale, Arizona 85258           |
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| 14 | Jain Joghegu   |
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